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Certificate of Mailing or Transmission CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 26263 7590 07/27/2005 EXP. Mail No. SONNENSCHEIN NATH & ROSENTHAL LLP EL 97654537 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. P.O. BOX 061080 WACKER DRIVE STATION, SEARS TOWER CHICAGO, IL 60606-1080 (Depositor's name) shall Turkers 10/21/2005 DEMMANU2 00000015 09715418 (Signature 01 FC:1501 1400.00 OP **L**2005 (Date) 02 FC:8001 33.00 OP CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. 10716/12 7715 11/16/2000 09/715,418 David A. Lewin TITLE OF INVENTION: WNT-REGULATED CYTOKINE-LIKE POLYPEPTIDE AND NUCLEIC ACIDS ENCODING SAME DATE DUE **PUBLICATION FEE** TOTAL FEE(S) DUE APPLN. TYPE SMALL ENTITY ISSUE FEE \$1400 10/27/2005 \$1400 \$0 NO nonprovisional **EXAMINER** ART UNIT **CLASS-SUBCLASS** ROMEO, DAVID S 1647 530-350000 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list Merchant & Gould P.C. CFR 1.363). (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Genentech, Inc. South San Francisco, California New Haven, Connecticut Curagen Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🚨 Government 4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: X Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number ______ (enclose an extra copy of this form). Advance Order - # of Copies ___

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